Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028 Expires 12/31/02 GSA No. 0246-EPA-OT

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RCRA RECORDS CENTER

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VIII. Type of Regulate	ed Waste Activity (Mai	rk 'X' in the appropriate	boxes. Refer to Ins	tructions)	
	A. Hazardous Wa				Management Activities
b. 100 to 1000 kg c. Less than 100	000kg/mo (2,200 lbs.) /mo (220-2,200 lbs.) kg/mo (220 lbs) icate Mode in boxes only al purposes	installation) required for instructions. 4. Exempt Boile Furnace a. Smelting, N ing Furnace		Facility Activity a. Tran b. Tran 2. Used C Indicat a. Proc b. Re-ro 3. Off-Spi 4. Used C a. Mark of Of Used Used Used Used Used Used Used Used	sporter sfer Facility III Processor/Re-refiner - e Type(s) of Activity(ies) essor
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nonlisted hazardou	8  F Nonlisted Hazardou s wastes your installatio	on handles; See 40 CF			
		(List specific EPA hazar	dous waste number(s) fo	or the Toxicity Charac	teristic contaminant(s))
Ignitable (D001) 2. Corrosive (D002)	3. Reactive (D003) 4. Toxicity Characteristic		2	3	4
C. Other Wastes. (S	tate-regulated or other	wastes requiring a han	dler to have an I.D. n	umber; See Instru	ctions.)
1	2	3	4	5	6
X. Certification					
i certify under penalty of a system designed to a the person or persons submitted is, to the be submitting false inforr	assure that qualified per who manage the system	sonnel properly gather m, or those persons di l beilef, true, accurate, ssibility of fine and im	and evaluate the information rectly responsible for and complete. I am prisonment for know	ormation submitted or gathering the inf aware that there are ing violations.	rvision in accordance with d. Based on my inquiry of ormation, the information e significant penalties for
Signature M.	/glan_	ParALD W	al Title (Type or pr	o-Res.	Date Signed 3/15/2002
XI. Comments					
Note: Mail completed f	orm to the appropriate I	EPA Regional or State	Office. (See Section	IV of the booklet t	or addresses.)

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and

## Notification of Regulated Waste Activity

**Date Received** (For Official Use Only)

MAR 19 2002

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VIII. Type of Regulated Waste Activity (M	lark 'X' in the a	ppropriate b	oxes. Refer to Inst.	ructions)	
A. Hazardous V			***************************************		Management Activities
1. Generator (See Instructions)  a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (220-2,200 lbs.) c. Less than 100 kg/mo (220 lbs) 2. Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes  Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	inst requires inst s 4. Exe Furn a. S in b. Si	allation) No uired for the ructions. mpt Boiler nace melting, Me ig Furnace I mall Quantif xemption	r, Disposer (at ote: A permit is nis activity, see and/or Industrial lting, and Refin- exemption y On-Site Burner jection Control	1. Used ( Facility Activity a. Transport of December 2. Used ( Indicast a. Processing b. Re-respondent of December 2. Used ( a. Maries of December 2. Used ( b. Maries of December 2. Used ( Used ( b. Maries of December 2. U	Oil Transporter/Transfer y - Indicate Type(s) of y(les) isporter isfer Facility Oil Processor/Re-refiner - te Type(s) of Activity(les)
B. Universal V	Waste Activity	/			
	aste				
IX. Description of Hazardous Wastes (Us	se additional s	heets if nece	essary)		
A. Listed Hazardous Wastes. (See 40 CF	R 261.31 - 33;	See instructi			
1 2	3	TT	4	5	6
7 8	9		10	11	12
B. Characteristics of Nonlisted Hazardo nonlisted hazardous wastes your installa to list more than 4 toxicity characteristic  1. Ignitable 2. Corrosive 3. Reactive 4. Toxicity (D001) (D002) (D003) Characteris	tion handles; waste codes.) (List specific	EPA hazardou	Parts 261.20 - 261.2 s waste number(s) for 2	4; See instruction the Toxicity Charac	ns if you need
C. Other Wastes. (State-regulated or other	r wastes requir	ing a handle	r to have an I.D. nu	mber; See Instru	ctions.)
1 2	3		4	5	6
X. Certification  I certify under penalty of law that this documer a system designed to assure that qualified pethe person or persons who manage the systesubmitted is, to the best of my knowledge an submitting false information, including the person of t	ersonnel prope em, or those pe d belief, true, a	rly gather an ersons direc accurate, and	d evaluate the infor tly responsible for d complete. I am av	mation submitted gathering the info vare that there ar	d. Based on my inquiry of ormation
Signature M. gen	1		Title (Type or prin		Date Signed
XI. Comments					
Note: Mail completed form to the appropriate	EPA Regional	or State Off	ce. (See Section IV	of the booklet f	or addresses.)

## A-TEC RECYCLING INC.

P.O. BOX 7391 DES MOINES, IOWA 50309





RESP

U.S. EPA Region 7
Air, RCRA, and Toxics Division
RCRA Enforcement and State Programs
Branch (ARTD/RESP)
901 North 5th Street
Kansas City, KS 66101
MAR 19 2002

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